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Bib Data Sheet

CONFIRMATION NO. 1336

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|-----------------------------|---------------------------------------|--------------|------------------------|------------------------------------|
| SERIAL NUMBER 10/785,427 | FILING DATE 02/25/2004 RULE | CLASS 514 | GROUP ART UNIT 1653 | ATTORNEY DOCKET NO. 2818-199 |
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APPLICANTS

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** CONTINUING DATA *****

This application is a CIP of 10/485,640 02/03/2004 ABN
 which is a 371 of PCT/IT02/00473 07/18/2002
 which claims benefit of 60/309,472 08/03/2001

RB
10-20-05

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 08/23/2004

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|---|------------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR COUNTRY ITALY | SHEETS DRAWING 2 | TOTAL CLAIMS 10 | INDEPENDENT CLAIMS 5 |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | | | |
| Verified and Acknowledged <i>RMB</i> Examiner's Signature | <i>RM</i> Initials | | | |

ADDRESS

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TITLE

Compositions and methods for treating female fertility

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|------------------------------------|---|--|
| FILING FEE RECEIVED 1680 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) |
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